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I hereby certify that this correspondence is being deposited with the United States Postal Service in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 9, 2006.

William R. Allen
William R. Allen, Reg. No. 48,389

9 January 2006
Date



PATENT

Applicant: Steven D. Clark

Serial No: 10/625,352

Filing Date: July 23, 2003

Art Unit: 1722

Examiner: Joseph S. Del Sole

Title: **LINEAR FLOW EQUALIZER FOR UNIFORM POLYMER
DISTRIBUTION IN A SPIN PACK OF A MELTSPINNING
APPARATUS**

Atty. Docket: NOR-1119

Confirmation No.: 8607

Cincinnati, OH 45202

January 9, 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. ☐ Small Entity status is claimed.
☒ Other than a Small Entity.
3. The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	26	MINUS	31	= 0	x \$25	\$0	x \$50	\$0
INDEP.	3	MINUS	3	= 0	x \$100	\$0	x \$200	\$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+\$180	\$0	+\$360	\$0
TOTALS					TOTAL FEE	\$	TOTAL FEE	\$0

- ☆ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- ☆☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

XX No additional fee for claims is required.

4. Attached is a check in the sum of \$_____.

____ Please charge my Deposit Account No. 23-3000 in the amount of \$0. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

(a) X Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<u>X</u>	one month	\$ 120.00	\$ 60.00
—	two months	\$ 450.00	\$225.00
—	three months	\$1,020.00	\$510.00
—	four months	\$1,590.00	\$795.00
—	five months	\$2,160.00	\$1,080.00

X Attached is a check in the amount of \$120.00 for the one month extension fee as required by 37 C.F.R. § 1.17(c)

— Please charge my Deposit Account No. 23-3000 in the amount of \$. A duplicate copy of this sheet is attached.

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

— An extension for months has already been secured and the fee paid thereof of \$ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$.

OR

(b) Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

XX If any additional fee for claims or extension of time is required, charge Account No. 23-3000. A duplicate of this transmittal is attached.

Respectfully submitted,
WOOD, HERRON & EVANS, L.L.P.

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